



U.S. Department of Justice
Office of the United States Trustee
Region 2

Eastern District of New York

IN RE: } CHAPTER 11
} CASE NO. 18-71748
ORION HEALTHCORP., INC., ET AL., }
} DEBTOR. }

**DEBTOR'S POST-CONFIRMATION
MONTHLY OPERATING REPORT
FOR THE PERIOD**
FROM 1-Mar-21 **TO** 31-Mar-21

Comes now the above-named debtor and files its Post-Confirmation Monthly Operating Report in accordance with the Guidelines established by the United States Trustee and FRBP 2015.

In accordance with 28 U.S.C. Section 1746, I declare under penalty of perjury that I have examined the information contained in this report and it is true and correct to the best of my knowledge.

Signed: 

Date: 04/12/2021

Howard M. Ehrenberg
Print Name

Chapter 11 Liquidating Trustee
Title

Liquidating Trustee's Address
and Phone Number:
333 South Grand Avenue
Suite 3400
Los Angeles, CA 90071
hehrenberg@sulmeyerlaw.com
Tel. 213.626.2311

Attorney's Address
and Phone Number:
Duane Morris LLP
230 Park Avenue
New York, New York 10169
Bar No. _____
Tel. 212-818-9200

Attorney's Address
and Phone Number:
SulmeyerKupetz
333 South Grand Avenue, Suite 3400
Los Angeles, CA 90071
Bar No. _____
Tel. 213-626-2311

Note: The original Monthly Operating Report is to be filed with the Court and a copy simultaneously provided to the United States Trustee. Monthly Operating Reports must be filed by the 20th day of the following month.

MONTHLY OPERATING REPORT -
POST CONFIRMATION

ATTACHMENT NO. 1

QUESTIONNAIRE		YES*	NO
1.	Have any assets been sold or transferred outside the normal course of business, or outside the Plan of Reorganization during this reporting period?		X
2.	Are any post-confirmation sales or payroll taxes past due?		X
3.	Are any amounts owed to post-confirmation creditors/vendors over 90 days delinquent?		X
4.	Is the Debtor current on all post-confirmation plan payments?	X	

*If the answer to any of the above questions is "YES," provide a detailed explanation of each item on a separate sheet.

INSURANCE INFORMATION		YES	NO*
1.	Are real and personal property, vehicle/auto, general liability, fire, theft, worker's compensation, and other necessary insurance coverages in effect?		X
2.	Are all premium payments current?	X	

*If the answer to any of the above questions is "NO," provide a detailed explanation of each item on a separate sheet.

CONFIRMATION OF INSURANCE			
TYPE of POLICY	and	CARRIER	Period of Coverage

DESCRIBE PERTINENT DEVELOPMENTS, EVENTS, AND MATTERS DURING THIS REPORTING PERIOD:
Estimated Date of Filing the Application for Final Decree: December 31, 2021

**MONTHLY OPERATING REPORT -
POST CONFIRMATION****ATTACHMENT NO. 2****CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name: Orion HealthCorp., Inc., et al.

Case Number: 18-71748

Date of Plan Confirmation:

All items must be answered. Any which do not apply should be answered "none" or "N/A".

	Monthly	Post Confirmation Total
1. CASH (Beginning of Period)	\$60,634,659.07	\$284,003,442.50
2. INCOME or RECEIPTS during the Period	\$13,259,300.85	\$ See attached Form 2
3. DISBURSEMENTS		
a. Operating Expenses (Fees/Taxes):		
(i) U.S. Trustee Quarterly Fees		\$
(ii) Federal Taxes		
(iii) State Taxes		
(iv) Other Taxes		
b. All Other Operating Expenses:	\$13,997,523.99	\$
Add Back Checks	- \$8,909.00	
c. Plan Payments:*		
(i) Administrative Claims		\$
(ii) Class One		
(iii) Class Two		
(iv) Class Three		
(v) Class Four		
(Attach additional pages as needed)		
Total Disbursements (Operating & Plan)	\$13,988,614.99	
1. CASH (End of Period)	\$59,905,344.93	\$

- * This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**MONTHLY OPERATING REPORT -
POST CONFIRMATION**

ATTACHMENT NO. 3

**CHAPTER 11 POST-CONFIRMATION
BANK ACCOUNT RECONCILIATIONS**

Bank Account Information		Account #1	Account #2	Account #3	Account #4
Name of Bank:		Metropolitan Commercial Bank	Metropolitan Commercial Bank	Metropolitan Commerical Bank	Metropolitan Commerical Bank
Account Number:		xxxx2973	xxxx7398	xxxx2415	xxxx3515
Purpose of Account (Operating/Payroll/Tax)		Money Market	Operating	Operating	Operating
Type of Account (e.g. checking)		Money Market	Checking	Checking	Checking
<hr/>					
1. Balance per Bank Statement	\$ 4,263,946.54	\$ -	\$ 119,603.79	\$ 55,521,794.60	
2. ADD: Deposits not credited					
3. SUBTRACT: Outstanding Checks				(\$8,909.00)	
4. Other Reconciling Items					
5. Month End Balance (Must Agree with Books)	\$ 4,263,946.54	\$ -	\$ 110,694.79	\$ 55,521,794.60	
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Note: Attach copy of each bank statement and bank reconciliation.

Investment Account Information		Date of Purchase	Type of Instrument	Purchase Price	Current Value
Bank / Account Name / Number					

Note: Attach copy of each investment account statement.

MONTHLY OPERATING REPORT - POST CONFIRMATION

ATTACHMENT NO. 4

CHAPTER 11 POST-CONFIRMATION

CASH/DEBIT/CHECK DISBURSEMENTS DETAILS

Name of Bank: Metropolitan Commercial Bank	
Account Numbers: xxxx2415, xxxx2973 & xxxx7398	
Purpose of Account (Operating/Payroll/Personal)	
Type of Account (e.g., Checking): Money Market Account & Checking Account	

If any checks written this period have not been delivered to the payee, provide details, including the payee, amount, explanation for holding check and anticipated delivery date of check.

**MONTHLY OPERATING REPORT -
POST CONFIRMATION****ATTACHMENT NO. 2****CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Constellation Healthcare Technologies, Inc.
Case Number:	18-71749
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

	Monthly	Post Confirmation Total
1. CASH (Beginning of Period)	\$ none	none
2. INCOME or RECEIPTS during the Period	\$ none	\$
3. DISBURSEMENTS		
a. Operating Expenses (Fees/Taxes):		
(i) U.S. Trustee Quarterly Fees	\$	\$
(ii) Federal Taxes	\$	\$
(iii) State Taxes	\$	\$
(iv) Other Taxes	\$	\$
b. All Other Operating Expenses:		
c. Plan Payments:*		
(i) Administrative Claims	\$	\$
(ii) Class One	\$	\$
(iii) Class Two	\$	\$
(iv) Class Three	\$	\$
(v) Class Four	\$	\$
(Attach additional pages as needed)		
Total Disbursements (Operating & Plan)	\$ none	\$
1. CASH (End of Period)	\$ none	\$

* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	NEMS Acquisition, LLC
Case Number:	18-71750
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. **Operating Expenses (Fees/Taxes):**

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. **All Other Operating Expenses:**

\$	\$

c. **Plan Payments:***

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name: Northeast Medical Solutions, LLC
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Case Number: 18-71751

Date of Plan Confirmation:

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. **Operating Expenses (Fees/Taxes):**

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. **All Other Operating Expenses:**

\$	\$

c. **Plan Payments:***

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	NEMS West Viringia, LLC
Case Number:	18-71752
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. **Operating Expenses (Fees/Taxes):**

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. **All Other Operating Expenses:**

\$	\$

c. **Plan Payments:***

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Physicians Practice Plus, LLC
Case Number:	18-71753
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

	Monthly	Post Confirmation Total
1. CASH (Beginning of Period)	\$ none	none
2. INCOME or RECEIPTS during the Period	\$ none	\$
3. DISBURSEMENTS		
a. Operating Expenses (Fees/Taxes):		
(i) U.S. Trustee Quarterly Fees	\$	\$
(ii) Federal Taxes	\$	\$
(iii) State Taxes	\$	\$
(iv) Other Taxes	\$	\$
b. All Other Operating Expenses:		
c. Plan Payments:*		
(i) Administrative Claims	\$	\$
(ii) Class One	\$	\$
(iii) Class Two	\$	\$
(iv) Class Three	\$	\$
(v) Class Four	\$	\$
(Attach additional pages as needed)		
Total Disbursements (Operating & Plan)	\$ none	\$
1. CASH (End of Period)	\$ none	\$

* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Physicians Practice Plus Holdings, LLC
Case Number:	18-71754
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Medical Billing Services, Inc.
Case Number:	18-71755
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
---------	----

3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Rand Medical Billing, Inc.
Case Number:	18-71756
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name: RMI Physician Services Corporation
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Case Number: 18-71757

Date of Plan Confirmation:

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Western Skies Practice Management, Inc.
Case Number:	18-71758
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name: Integrated Physician Solutions, Inc.
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Case Number: 18-71759

Date of Plan Confirmation:

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	NYNM Acquisition, LLC
Case Number:	18-71760
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Northstar FHA, LLC
Case Number:	18-71761
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
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3. DISBURSEMENTS

a. **Operating Expenses (Fees/Taxes):**

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. **All Other Operating Expenses:**

\$	\$

c. **Plan Payments:***

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Northstar First Health, LLC
Case Number:	18-71762
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

	Monthly	Post Confirmation Total
1. CASH (Beginning of Period)	\$ none	none

2. INCOME or RECEIPTS during the Period	\$ none	\$
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3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Vachette Business Services, Ltd.
Case Number:	18-71763
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
---------	----

3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
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1. CASH (End of Period)

\$ none	\$
---------	----

* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	MDRX Medical Billing, LLC
Case Number:	18-71764
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

	Monthly	Post Confirmation Total
1. CASH (Beginning of Period)	\$ none	none

2. INCOME or RECEIPTS during the Period	\$ none	\$
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3. DISBURSEMENTS

a. **Operating Expenses (Fees/Taxes):**

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

b. **All Other Operating Expenses:**

c. **Plan Payments:***

- (i) Administrative Claims
 - (ii) Class One
 - (iii) Class Two
 - (iv) Class Three
 - (v) Class Four
- (Attach additional pages as needed)

Total Disbursements (Operating & Plan)

\$	\$
\$	\$
\$	\$
\$ none	\$

1. CASH (End of Period)	\$ none	\$
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* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name: VEGA Medical Professionals, LLC

Case Number: 18-71765

Date of Plan Confirmation:

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
---------	----

3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
---------	----

1. CASH (End of Period)

\$ none	\$
---------	----

* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Allegiance Consulting Associates, LLC
Case Number:	18-71766
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

	Monthly	Post Confirmation Total
1. CASH (Beginning of Period)	\$ none	none

2. INCOME or RECEIPTS during the Period	\$ none	\$
---	---------	----

3. DISBURSEMENTS

a. **Operating Expenses (Fees/Taxes):**

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. **All Other Operating Expenses:**

\$	\$

c. **Plan Payments:***

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
---------	----

1. CASH (End of Period)	\$ none	\$
-------------------------	---------	----

* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Allegiance Billing & Consulting, LLC
Case Number:	18-71767
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
---------	----

3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
---------	----

1. CASH (End of Period)

\$ none	\$
---------	----

- * This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	Phoenix Health, LLC
Case Number:	18-71789
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

1. CASH (Beginning of Period)

Monthly	Post Confirmation Total
\$ none	none

2. INCOME or RECEIPTS during the Period

\$ none	\$
---------	----

3. DISBURSEMENTS

a. Operating Expenses (Fees/Taxes):

- (i) U.S. Trustee Quarterly Fees
- (ii) Federal Taxes
- (iii) State Taxes
- (iv) Other Taxes

\$	\$

b. All Other Operating Expenses:

\$	\$

c. Plan Payments:*

- (i) Administrative Claims
- (ii) Class One
- (iii) Class Two
- (iv) Class Three
- (v) Class Four

(Attach additional pages as needed)

\$	\$

Total Disbursements (Operating & Plan)

\$ none	\$
---------	----

1. CASH (End of Period)

\$ none	\$
---------	----

* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

**CHAPTER 11 POST-CONFIRMATION
SCHEDULE OF RECEIPTS AND DISBURSEMENTS**

Case Name:	New York Network Management, LLC
Case Number:	18-74545
Date of Plan Confirmation:	

All items must be answered. Any which do not apply should be answered "none" or "N/A".

	Monthly	Post Confirmation Total
1. CASH (Beginning of Period)	\$ none	none
2. INCOME or RECEIPTS during the Period	\$ none	\$
3. DISBURSEMENTS		
a. Operating Expenses (Fees/Taxes):		
(i) U.S. Trustee Quarterly Fees	\$	\$
(ii) Federal Taxes	\$	\$
(iii) State Taxes	\$	\$
(iv) Other Taxes	\$	\$
b. All Other Operating Expenses:		
c. Plan Payments:*		
(i) Administrative Claims	\$	\$
(ii) Class One	\$	\$
(iii) Class Two	\$	\$
(iv) Class Three	\$	\$
(v) Class Four	\$	\$
(Attach additional pages as needed)		
Total Disbursements (Operating & Plan)	\$ none	\$
1. CASH (End of Period)	\$ none	\$

* This includes any and all disbursements made under the plan of reorganization or in the ordinary course of the reorganized debtor's post-confirmation business, whether the disbursements are made through a trust, by a third party, or by the reorganized debtor.

Form 2
Cash Receipts And Disbursements Record

Page: 1

Case No.:	18-71748	Trustee Name:	Howard M. Ehrenberg (001350)
Case Name:	The Orion Liquidating Trust	Bank Name:	Metropolitan Commercial Bank
Taxpayer ID #:	**-***5196	Account #:	*****2973 MMA
For Period Ending:	03/31/2021	Blanket Bond (per case limit):	\$0.00
		Separate Bond (if applicable):	N/A

1	2	3	4	5	6	7	
Trans. Date	Check or Ref. #	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposit \$	Disbursement \$	Account Balance
03/03/21		[REDACTED]	settlement payment	1249-000	9,500,000.00		14,510,099.34
03/04/21		To Account #*****2415	transfer	9999-000		3,382,500.00	11,127,599.34
03/10/21		[REDACTED]	settlement funds [REDACTED]	1249-000	3,750,000.00		14,877,599.34
03/11/21		To Account #*****2415	transfer	9999-000		150,000.00	14,727,599.34
03/11/21		To Account #*****2415	transfer	9999-000		150,000.00	14,577,599.34
03/16/21		To Account #*****2415	transfer	9999-000		9,000,000.00	5,577,599.34
03/17/21		To Account #*****2415	transfer	9999-000		1,315,425.00	4,262,174.34
03/31/21	Int	Metropolitan Commercial Bank	Interest Posting	1270-000	1,772.20		4,263,946.54

COLUMN TOTALS	13,251,772.20	13,997,925.00	\$4,263,946.54
Less: Bank Transfers/CDs	0.00	13,997,925.00	
Subtotal	13,251,772.20	0.00	
Less: Payments to Debtors	0.00		
NET Receipts / Disbursements	\$13,251,772.20	\$0.00	

Form 2
Cash Receipts And Disbursements Record

Page: 2

Case No.:	18-71748	Trustee Name:	Howard M. Ehrenberg (001350)
Case Name:	The Orion Liquidating Trust	Bank Name:	Metropolitan Commercial Bank
Taxpayer ID #:	**-***5196	Account #:	*****7398 Checking
For Period Ending:	03/31/2021	Blanket Bond (per case limit):	\$0.00
		Separate Bond (if applicable):	N/A

1	2	3	4	5	6	7	
Trans. Date	Check or Ref. #	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposit \$	Disbursement \$	Account Balance

(No transactions on file for this period)

COLUMN TOTALS		0.00	0.00	\$0.00
Less: Bank Transfers/CDs		0.00	0.00	
Subtotal		0.00	0.00	
Less: Payments to Debtors			0.00	
NET Receipts / Disbursements		\$0.00		\$0.00

Form 2
Cash Receipts And Disbursements Record

Page: 3

Case No.:	18-71748	Trustee Name:	Howard M. Ehrenberg (001350)
Case Name:	The Orion Liquidating Trust	Bank Name:	Metropolitan Commercial Bank
Taxpayer ID #:	**-***5196	Account #:	*****2415 Checking
For Period Ending:	03/31/2021	Blanket Bond (per case limit):	\$0.00
		Separate Bond (if applicable):	N/A

1	2	3	4	5	6	7	
Trans. Date	Check or Ref. #	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposit \$	Disbursement \$	Account Balance
03/02/21	280	Iron Mountain	invoice for customer CSS4R March 2021 invoice DLDV166	2420-000		1,438.66	108,855.12
03/02/21	281	Iron Mountain	invoice number DLBC182 customer N3M9R storage February 2021	2420-000		640.91	108,214.21
03/02/21	282	Howard Ehrenberg	fee payment re March	2100-000		15,000.00	93,214.21
03/02/21	283	SulmeyerKupetz	invoice 2424883 services rendered through February 28, 2021	3110-000		34,230.70	58,983.51
03/02/21	284	Duane Morris LLP	invoice no. 2751706 February 2021 services	3210-600		13,083.80	45,899.71
03/02/21	285	JAMS	invoice 5574184 mediation deposit	3721-000		9,000.00	36,899.71
03/04/21		To Account #*****2415	transfer	9999-000	3,382,500.00		3,419,399.71
03/04/21	286	Thomas, Alexander, Forrester & Sorensen LLP	████████ contingency fee and expense bill re ██████████			3,384,436.95	34,962.76
			████████ \$9,500,000	3210-600			
					\$3,325,000.00		
						3220-610	
			expense bill		\$59,436.95		
03/04/21	287	Holthouse Carlin & Van Trigt LLP	invoice no. 2051787 February 2021 services	3410-000		9,893.50	25,069.26
03/05/21	288	River House One Rockefeller Park	account number █████ 1412	2420-000		7,856.92	17,212.34
03/11/21		To Account #*****2415	transfer	9999-000	150,000.00		167,212.34
03/11/21		To Account #*****2415	transfer	9999-000	150,000.00		317,212.34
03/11/21	289	Epiq Corporate Restructuring LLC	invoice no. 90524594 February 2021 services Customer No. 3006883	2990-000		3,709.17	313,503.17
03/11/21	290	FTI Consulting, Inc.	invoice no. 7576156 February 2021			70,060.65	243,442.52
			expenses	3732-000			
					\$10,959.45		
			professional services	3731-000			
					\$59,101.20		
03/11/21	291	Reed Smith LLP	invoice no. 3375480 February 2021 services client number 361500	3210-600		115,400.48	128,042.04
03/15/21	292	JAMS	invoice 5571340 mediation deposit	3721-000		9,000.00	119,042.04
03/15/21	293	LAGALANTE PLLC	invoice no. 28375 February 2021 services	3210-600		162.00	118,880.04
03/16/21		To Account #*****2415	transfer	9999-000	9,000,000.00		9,118,880.04

Page Subtotals: \$12,682,500.00 \$3,673,913.74

Form 2
Cash Receipts And Disbursements Record

Page: 4

Case No.:	18-71748	Trustee Name:	Howard M. Ehrenberg (001350)
Case Name:	The Orion Liquidating Trust	Bank Name:	Metropolitan Commercial Bank
Taxpayer ID #:	**-**5196	Account #:	*****2415 Checking
For Period Ending:	03/31/2021	Blanket Bond (per case limit):	\$0.00
		Separate Bond (if applicable):	N/A

1	2	3	4	5	6	7	
Trans. Date	Check or Ref. #	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposit \$	Disbursement \$	Account Balance
03/16/21	294	Schnader Harrison Segal & Lewis LLP	invoice 3042877 matter *****-0024 services December 2020	3992-000		3,551.25	9,115,328.79
03/17/21		To Account #*****2415	transfer	9999-000	1,315,425.00		10,430,753.79
03/17/21	295	Thomas, Alexander, Forrester & Sorensen LLP	████ contingency fee and expense bill re █████ settlement			1,315,425.00	9,115,328.79
			████ \$3,750,000	3210-600			
				\$1,312,500.00			
			expense bill	3220-610			
				\$2,925.00			
03/17/21		Stifel Bank & Trust	secured lender sixth distribution	4110-000		843,750.00	8,271,578.79
03/17/21		Bank of America	secured lender sixth distribution	4110-000		3,413,793.12	4,857,785.67
03/17/21		KeyBank National Association	secured lender sixth distribution	4110-000		1,348,060.33	3,509,725.34
03/17/21		Woodforest National Bank	secured lender sixth distribution	4110-000		1,125,000.00	2,384,725.34
03/17/21		BMO Harris Bank NA	secured lender sixth distribution	4110-000		2,269,396.55	115,328.79
03/23/21	296	Phillips ADR Enterprises, P.C.	invoice nos. 19037 and 19239			! 6,600.00	108,728.79
			invoice no. 19037	3721-000			
				\$2,100.00			
			invoice no. 19239	3110-000			
				\$4,500.00			
03/29/21		Hahn & Hessen LLP	refund-mediator	3991-000		-2,650.00	111,378.79
03/29/21	297	Public Storage	rental charges April 2021 Units E034 and E035	2420-000		! 684.00	110,694.79

COLUMN TOTALS	13,997,925.00	13,997,523.99	\$110,694.79
Less: Bank Transfers/CDs	13,997,925.00	0.00	
Subtotal	0.00	13,997,523.99	
Less: Payments to Debtors		0.00	
NET Receipts / Disbursements	\$0.00	\$13,997,523.99	

Form 2
Cash Receipts And Disbursements Record

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Case No.:	18-71748	Trustee Name:	Howard M. Ehrenberg (001350)
Case Name:	The Orion Liquidating Trust	Bank Name:	Metropolitan Commercial Bank
Taxpayer ID #:	**-***5196	Account #:	*****3515 Destra Account
For Period Ending:	03/31/2021	Blanket Bond (per case limit):	\$0.00
		Separate Bond (if applicable):	N/A

1	2	3	4	5	6	7	
Trans. Date	Check or Ref. #	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposit \$	Disbursement \$	Account Balance
03/31/21	Int	Metropolitan Commercial Bank	Interest Posting	1270-000	7,528.65		55,521,794.60

COLUMN TOTALS	7,528.65	0.00	\$55,521,794.60
Less: Bank Transfers/CDs	0.00	0.00	
Subtotal	7,528.65	0.00	
Less: Payments to Debtors	0.00		
NET Receipts / Disbursements	\$7,528.65	\$0.00	

Form 2
Cash Receipts And Disbursements Record

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Case No.: 18-71748
Case Name: The Orion Liquidating Trust
Taxpayer ID #: **-**5196
For Period Ending: 03/31/2021

Trustee Name: Howard M. Ehrenberg (001350)
Bank Name: Metropolitan Commercial Bank
Account #: *****3515 Destra Account
Blanket Bond (per case limit): \$0.00
Separate Bond (if applicable): N/A

TOTAL - ALL ACCOUNTS	NET DEPOSITS	NET DISBURSEMENTS	ACCOUNT BALANCES
*****2973 MMA	\$13,251,772.20	\$0.00	\$4,263,946.54
*****7398 Checking	\$0.00	\$0.00	\$0.00
*****2415 Checking	\$0.00	\$13,997,523.99	\$110,694.79
*****3515 Destra Account	\$7,528.65	\$0.00	\$55,521,794.60
	\$13,259,300.85	\$13,997,523.99	\$59,896,435.93

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Page: 1

Bank Reconciliation Detail Report**Trustee: Howard M. Ehrenberg (001350)****Period End: 03/31/2021****Case:** 18-71748 - THE ORION LIQUIDATING TRUST**Bank Account:** [REDACTED] 2973 (MMA)

Outstanding Item Reconciliation:	
Trustee Ledger Balance:	\$4,263,946.54
Less Deposits In Transit:	\$0.00
Add (Less) Net Outstanding Transfers:	\$0.00
Add Outstanding Checks:	\$0.00
Add (Less) Other Outstanding	\$0.00
Adjusted Ledger Balance: (ledger balance excluding outstanding items)	\$4,263,946.54
Bank Balance Through March 2021:	\$4,263,946.54
Unreconciled Difference:	\$0.00

Transaction Details

Type	Ref.	Issued	Cleared / Stopped / Voided	Paid To	Amount
					Total: \$0.00

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Bank Reconciliation Detail Report
Trustee: Howard M. Ehrenberg (001350)
Period End: 03/31/2021

Case: 18-71748 - THE ORION LIQUIDATING TRUST**Bank Account:** [REDACTED] 2415 (Checking)

Outstanding Item Reconciliation:	
Trustee Ledger Balance:	\$110,694.79
Less Deposits In Transit:	\$0.00
Add (Less) Net Outstanding Transfers:	\$0.00
Add Outstanding Checks:	\$8,909.00
Add (Less) Other Outstanding	\$0.00
Adjusted Ledger Balance: (ledger balance excluding outstanding items)	\$119,603.79
Bank Balance Through March 2021:	\$119,603.79
Unreconciled Difference:	\$0.00

Transaction Details

Type	Ref.	Issued	Cleared / Stopped / Voided	Paid To	Amount
Check	242	01/11/2021	-- Pending	U.S. Trustee Payment Center	(\$325.00)
Check	248	01/11/2021	-- Pending	U.S. Trustee Payment Center	(\$325.00)
Check	249	01/11/2021	-- Pending	U.S. Trustee Payment Center	(\$325.00)
Check	254	01/11/2021	-- Pending	U.S. Trustee Payment Center	(\$325.00)
Check	255	01/11/2021	-- Pending	U.S. Trustee Payment Center	(\$325.00)
Check	296	03/23/2021	-- Pending	Phillips ADR Enterprises, P.C.	(\$6,600.00)
Check	297	03/29/2021	-- Pending	Public Storage	(\$684.00)
Total:					(\$8,909.00)

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Bank Reconciliation Detail Report**Trustee: Howard M. Ehrenberg (001350)****Period End: 03/31/2021****Case:** 18-71748 - THE ORION LIQUIDATING TRUST**Bank Account:** [REDACTED] 3515 (Destra Account)

Outstanding Item Reconciliation:	
Trustee Ledger Balance:	\$55,521,794.60
Less Deposits In Transit:	\$0.00
Add (Less) Net Outstanding Transfers:	\$0.00
Add Outstanding Checks:	\$0.00
Add (Less) Other Outstanding	\$0.00
Adjusted Ledger Balance: (ledger balance excluding outstanding items)	\$55,521,794.60
Bank Balance Through March 2021:	\$55,521,794.60
Unreconciled Difference:	\$0.00

Transaction Details

Type	Ref.	Issued	Cleared / Stopped / Voided	Paid To	Amount
					Total: \$0.00

Period Covered:

March 01, 2021 - March 31, 2021

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Mr. Howard Ehrenberg
333 South Grand Ave
Suite 3400
Los Angeles CA 90071

Case Number	18-71748
Case Name	The Orion Liquidating Trust
Trustee Number	DEBTOR
Trustee Name	001350
	Mr. Howard Ehrenberg
	TRUSTEE

Questions: 

800.634.7734

banking.services@stretto.com
www.stretto.com

Consolidated Balance Summary

Account	Number	Ending Balance Prior Period	Ending Balance This Period
Checking Account			
TRUSTEE CHECKING	2415	\$180,821.68	\$119,603.79
Money Market			
MONEY MARKET	2973	\$5,010,099.34	\$4,263,946.54
MONEY MARKET	3515	\$55,514,265.95	\$55,521,794.60
Total		\$60,705,186.97	\$59,905,344.93

MONEY MARKET

Account Number: **12973**

Enclosures	0	Beginning Balance	\$5,010,099.34
Avg Collected Balance	\$7,840,663.73	+Total Additions	\$13,251,772.20
Interest Paid Year to Date	\$3,043.08	-Total Subtractions	\$13,997,925.00
		Ending Balance	\$4,263,946.54

* Indicates a Skip in Check Number(s)
"E" Indicate an Electronic Check

Debits

Date	Description	Subtractions
03-04	Transfer from 2973 to 2415	\$3,382,500.00
03-11	Transfer from 2973 to 2415	\$150,000.00
03-12	Transfer from 2973 to 2415	\$150,000.00
03-16	Transfer from 2973 to 2415	\$9,000,000.00
03-17	Transfer from 2973 to 2415	\$1,315,425.00

Credits

Date	Description	Additions
03-03	WIRE [REDACTED]	\$9,500,000.00
03-10	WIRE [REDACTED]	\$3,750,000.00
03-31	INTEREST PAID 2/27 THROUGH 3/31	\$1,772.20

Daily Balances

Date	Amount	Date	Amount	Date	Amount
03-03	\$14,510,099.34	03-04	\$11,127,599.34	03-10	\$14,877,599.34
03-11	\$14,727,599.34	03-12	\$14,577,599.34	03-16	\$5,577,599.34
03-17	\$4,262,174.34	03-31	\$4,263,946.54		

Period Covered:

March 01, 2021 - March 31, 2021

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Interest Information

Annual percentage yield earned	0.25%
Interest-bearing days	33
Average balance for APY	\$7,840,663.73
Interest earned	\$1,772.20

Note: When the statement period end date falls on a weekend (Saturday or Sunday) or bank holiday, the posted interest reflects calculations only up to the prior business day (e.g. Friday) before the period end date. Interest accrued after the last business day will be reflected in the next month's statement.

TRUSTEE CHECKING**Account Number:** [REDACTED] 2415

Enclosures	19	Beginning Balance	\$180,821.68
		+Total Additions	\$14,000,575.00
		-Total Subtractions	\$14,061,792.89
		Ending Balance	\$119,603.79

* Indicates a Skip in Check Number(s)

"E" Indicate an Electronic Check

Checks

Check #	Date	Amount
277	03-02	\$52,590.90
278	03-02	\$684.00
279	03-02	\$15,628.00
280	03-04	\$1,438.66
281	03-05	\$640.91
282	03-08	\$15,000.00
283	03-08	\$34,230.70
284	03-10	\$13,083.80
285	03-04	\$9,000.00
286	03-15	\$3,384,436.95
287	03-08	\$9,893.50
288	03-10	\$7,856.92
289	03-19	\$3,709.17
290	03-16	\$70,060.65
291	03-18	\$115,400.48
292	03-17	\$9,000.00
293	03-25	\$162.00
294	03-23	\$3,551.25
295	03-22	\$1,315,425.00

Debits

Date	Description	Subtractions
03-17	WIRE TO Stifel Bank & Trust	\$843,750.00
03-17	WIRE TO Bank of America	\$3,413,793.12
03-17	WIRE TO BMO Harris Bank NA	\$2,269,396.55
03-17	WIRE TO KeyBank National Associa	\$1,348,060.33
03-17	WIRE TO Woodforest National Bank	\$1,125,000.00

Period Covered:

March 01, 2021 - March 31, 2021

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Credits

Date	Description	Additions
03-04	Transfer from 2973 to 2415	\$3,382,500.00
03-11	Transfer from 2973 to 2415	\$150,000.00
03-12	Transfer from 2973 to 2415	\$150,000.00
03-16	Transfer from 2973 to 2415	\$9,000,000.00
03-17	Transfer from 2973 to 2415	\$1,315,425.00
03-31	DEP 10004	\$2,650.00

Daily Balances

Date	Amount	Date	Amount	Date	Amount
03-02	\$111,918.78	03-04	\$3,483,980.12	03-05	\$3,483,339.21
03-08	\$3,424,215.01	03-10	\$3,403,274.29	03-11	\$3,553,274.29
03-12	\$3,703,274.29	03-15	\$318,837.34	03-16	\$9,248,776.69
03-17	\$1,555,201.69	03-18	\$1,439,801.21	03-19	\$1,436,092.04
03-22	\$120,667.04	03-23	\$117,115.79	03-25	\$116,953.79
03-31	\$119,603.79				

MONEY MARKET

Account Number: [REDACTED] 3515

Enclosures	0	Beginning Balance	\$55,514,265.95
Avg Collected Balance		+Total Additions	\$7,528.65
Interest Paid Year to Date		-Total Subtractions	\$0.00
		Ending Balance	\$55,521,794.60

* Indicates a Skip in Check Number(s)

"E" Indicate an Electronic Check

Credits

Date	Description	Additions
03-31	INTEREST PAID 2/27 THROUGH 3/31	\$7,528.65

Daily Balances

Date	Amount	Date	Amount	Date	Amount
03-31	\$55,521,794.60				

Interest Information

Annual percentage yield earned	0.15%
Interest-bearing days	33
Average balance for APY	\$55,514,265.95
Interest earned	\$7,528.65

Note: When the statement period end date falls on a weekend (Saturday or Sunday) or bank holiday, the posted interest reflects calculations only up to the prior business day (e.g. Friday) before the period end date. Interest accrued after the last business day will be reflected in the next month's statement.



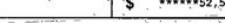
DOC 937 Filed 04/13
Metropolitan Commercial Bank
99 Park Avenue
New York NY 10016
<http://www.metropolitanbankny.com>

The logo consists of the word "Member" above the letters "FDIC". The "F" and "D" are capitalized and bolded.

Period Covered:

March 01, 2021 - March 31, 2021

Page 4 of 9

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW								
Howard M. Ehresberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071		Metropolitan Commercial Bank New York, NY (212) 345-4739 for EBanking						
277 11335260 VOID AFTER 90 DAYS								
<div style="display: flex; justify-content: space-between;"> Date 02/17/2021 </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Debit \$ 52,590.90 </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">THE ORION LIQUIDATING TRUST (18-71748)</td> <td style="padding: 5px;">*</td> </tr> <tr> <td style="padding: 5px;">Invoice no. 7573633 January 2021</td> <td style="padding: 5px;">*</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 5px;">\$ *****52,590.90</td> </tr> </table> <p style="margin-top: 20px;">Pay to the Order of FTI Consulting, Inc. PO Box 418005 Boston, MA 02241-8005</p> <p style="text-align: right; margin-top: 20px;">  Howard M. Ehresberg </p>			THE ORION LIQUIDATING TRUST (18-71748)	*	Invoice no. 7573633 January 2021	*	\$ *****52,590.90	
THE ORION LIQUIDATING TRUST (18-71748)	*							
Invoice no. 7573633 January 2021	*							
\$ *****52,590.90								

03/02/2021 277 \$52,590.90

>011000138<
CR PAYEE ACCT
LACK END GTD
BANK OF AMERICA

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW							
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071		Metropolitan Commercial Bank New York, NY (212) 345-4759 for EBanking					
278 1-133/260							
VOID AFTER 90 DAYS							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px; vertical-align: top;"> Debtor THE ORION LIQUIDATING TRUST(18-71748) </td> <td style="padding: 5px; vertical-align: bottom;"> Date 02/24/2021 </td> </tr> <tr> <td style="padding: 5px; vertical-align: top;"> rental charges March 2021 Units E034 and E035 </td> <td style="padding: 5px; vertical-align: bottom;"> \$ *****684.00 </td> </tr> </table> <p style="margin-top: 10px;"><u>—Six Hundred Eighty Four Dollars and 00/100</u></p> <p style="margin-top: 10px;">Pay to the Order of Public Storage 2850 Rogerakis Road Houston, TX 77042</p> <p style="margin-top: 10px; text-align: right;">  Howard M. Ehrenberg </p>				Debtor THE ORION LIQUIDATING TRUST(18-71748)	Date 02/24/2021	rental charges March 2021 Units E034 and E035	\$ *****684.00
Debtor THE ORION LIQUIDATING TRUST(18-71748)	Date 02/24/2021						
rental charges March 2021 Units E034 and E035	\$ *****684.00						

03/02/2021 278 \$684.00

10/10/2011

JPMorgan Chase Bank 030103 741903 937490023059

FOR DEPOSIT ONLY
PUBLIC STORAGE 00000000000000000000000000000000

\$1,000.00

JPMorgan Chase

2.27.2021

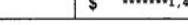
\$684.00

03/02/2021		278	\$684.00
THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK WHICH HOLD AT AN ANGLE TO VIEW.			
 Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave. Suite 3400 Los Angeles, CA 90071		Metropolitan Commercial Bank New York, NY (212) 545-6739 for EBilling	279 i-1335/260 VOID AFTER 90 DAYS
Date THE ORION LIQUIDATING TRUST(18-71748)		Date 02/25/2021	
renewal premium policy period 3/1/2021 to 3/1/2022		\$ *****15,628.00	
<i>--Fifteen Thousand Six Hundred Twenty Eight Dollars and 00/100</i>			
Per the Order of Naivar Associates Insurance Agency 423 McGroarty Street San Gabriel, CA 91776			
 Howard M. Ehrenberg			
GHRCTH-1 [REDACTED]			

03/02/2021 279 \$15,628.00

03/02/2021 278 \$684.00
235465023
For Deposit Only - JPMC

\$15,628.00

THIS CHECK IS VOID WITHOUT BLUE AND GREEN BACKGROUND AND WATERMARK - VALID IN NEW YORK ONLY	
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	
Metropolitan Commercial Bank New York, NY (212) 365-4739 for EBanking	
i-1335/260	
VOID AFTER 90 DAYS	
Dobro	
THE ORION LIQUIDATING TRUST(18-71748)	
Date 03/02/2021	
invoice for customer CS54K March 2021 invoice LDLV166	
\$ *****1,438.66	
<i>One Thousand Four Hundred Thirty Eight Dollars and 66/100</i>	
Pay to the Order of Treu Mountain PO Box 601002 Pasadena, CA 91189-1002	
NO MAT	
 Howard M. Ehrenberg	
#0000143866#	

03/04/2021 280 \$1,438.66

JPMORGANCHASE BK NA CR TO NMD
030321 >074909962< PAYEE ALL
14053460 0601002 RTS RSVD
00954429 141 000000323285139

\$1,438.66



Period Covered:

March 01, 2021 - March 31, 2021

Page 5 of 9

<small>THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW</small>		281
333 South Grand Ave, Suite 3400 Los Angeles, CA 90071 New York, NY (212) 365-6739 for Eltasking		1-1335/260
VOID AFTER 90 DAYS		
Dobor THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Invoice number DLBC182 customer NJM49R storage February 2021		\$ *****640.91
<small>---Six Hundred Forty Dollars and 91/100</small>		
<small>Pay to the Order of Iron Mountain PO Box 27128 New York, NY 10087-7128</small>		
<i>NO MAT</i> <i>Howard M. Ehrenberg</i>		
#0000064091		

<small>THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW</small>		281
333 South Grand Ave, Suite 3400 Los Angeles, CA 90071 New York, NY (212) 365-6739 for Eltasking		1-1335/260
VOID AFTER 90 DAYS		
Dobor THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Invoice number DLBC182 customer NJM49R storage February 2021		\$ *****640.91
<small>---Six Hundred Forty Dollars and 91/100</small>		
<small>Pay to the Order of Iron Mountain PO Box 27128 New York, NY 10087-7128</small>		
<i>Howard M. Ehrenberg</i>		
#0000064091		

03/05/2021 281 \$640.91

<small>THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW</small>		282
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071 New York, NY (212) 365-6739 for Eltasking		1-1335/260
VOID AFTER 90 DAYS		
Dobor THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Fee payment re March		\$ *****15,000.00
<small>---Fifteen Thousand Dollars and 00/100</small>		
<small>Pay to the Order of Howard Ehrenberg SalmeierKupetz 333 S. Grant Avenue, Suite 3400 Los Angeles, CA 90071</small>		
<i>Howard M. Ehrenberg</i>		
#0000064091		

<small>THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW</small>		281
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071 New York, NY (212) 365-6739 for Eltasking		1-1335/260
VOID AFTER 90 DAYS		
Dobor THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Fee payment re March		\$ *****15,000.00
<small>---Fifteen Thousand Dollars and 00/100</small>		
<small>Pay to the Order of Howard Ehrenberg SalmeierKupetz 333 S. Grant Avenue, Suite 3400 Los Angeles, CA 90071</small>		
<i>Howard M. Ehrenberg</i>		
#0000064091		

03/08/2021 282 \$15,000.00

<small>THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW</small>		283
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071 New York, NY (212) 365-6739 for Eltasking		1-1335/260
VOID AFTER 90 DAYS		
Dobor THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Invoice 2424883 services rendered through February 28, 2021		\$ *****34,230.70
<small>---Thirty Four Thousand Two Hundred Thirty Dollars and 70/100</small>		
<small>Pay to the Order of SalmeierKupetz 333 South Grand Avenue, Suite 3400 Los Angeles, CA 90071</small>		
<i>Howard M. Ehrenberg</i>		
#0000064091		

<small>THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW</small>		282
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071 New York, NY (212) 365-6739 for Eltasking		1-1335/260
VOID AFTER 90 DAYS		
Dobor THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Invoice 2424883 services rendered through February 28, 2021		\$ *****34,230.70
<small>---Thirty Four Thousand Two Hundred Thirty Dollars and 70/100</small>		
<small>Pay to the Order of SalmeierKupetz 333 South Grand Avenue, Suite 3400 Los Angeles, CA 90071</small>		
<i>Howard M. Ehrenberg</i>		
#0000064091		

03/08/2021 283 \$34,230.70

<small>THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW</small>		284
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071 New York, NY (212) 365-6739 for Eltasking		1-1335/260
VOID AFTER 90 DAYS		
Dobor THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Invoice no. 2751706 February 2021 services		\$ *****13,083.80
<small>---Thirteen Thousand Eighty Three Dollars and 80/100</small>		
<small>Pay to the Order of Dufine Morris LLP attn: Payment Processing 30 South 17th Street Philadelphia, PA 19103-4196</small>		
<i>Howard M. Ehrenberg</i>		
#0000064091		

<small>THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW</small>		284
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071 New York, NY (212) 365-6739 for Eltasking		1-1335/260
VOID AFTER 90 DAYS		
Dobor THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Invoice no. 2751706 February 2021 services		\$ *****13,083.80
<small>---Thirteen Thousand Eighty Three Dollars and 80/100</small>		
<small>Pay to the Order of Dufine Morris LLP attn: Payment Processing 30 South 17th Street Philadelphia, PA 19103-4196</small>		
<i>Howard M. Ehrenberg</i>		
#0000064091		

03/10/2021 284 \$13,083.80

03/10/2021 284 \$13,083.80



Period Covered:

March 01, 2021 - March 31, 2021

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THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for EBanking	285 I-1335260 VOID AFTER 90 DAYS
THE ORION LIQUIDATING TRUST(18-71748)		Date 03/02/2021
Invoice no. 5574184 mediation deposit		\$ *****9,000.00
<i>Howard M. Ehrenberg</i>		

ENDORSE HERE TO THE ACCOUNT OF THE
WELLS FARGO BANK NEW YORK
ADVISOR: ALICE KARLSON
ACCT. NO.: 073542
DATE: 03/22/2021
CHECK HERE AFTER MOBILE OR REMOTE DEPOSIT
DO NOT WRITE STAFF SIGNATURE IN THIS BOX
HOLD FOR FINANCIAL INVESTIGATION

03/04/2021 285 \$9,000.00

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for EBanking	286 I-1335260 VOID AFTER 90 DAYS
THE ORION LIQUIDATING TRUST(18-71748)		Date 03/04/2021
Contingency fee and expense bill re [REDACTED] element		\$ ***3,384,436.95
<i>Howard M. Ehrenberg</i>		

Credit to the Account of
Within Name Payee
CREDIT UNION BUSINESS BANK
03122021 001020001510780 122042007
03-10-21-34

03/15/2021 286 \$3,384,436.95

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for EBanking	287 I-1335260 VOID AFTER 90 DAYS
THE ORION LIQUIDATING TRUST(18-71748)		Date 03/04/2021
Invoice no. 205187 February 2021 services		\$ *****9,893.50
<i>Howard M. Ehrenberg</i>		

ENDORSE HERE
FOR DEPOSIT ONLY WITHIN NAMED PAYEE
CMB 12201006
ACCT 1120108503
03-10-21-34

03/08/2021 287 \$9,893.50

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for EBanking	288 I-1335260 VOID AFTER 90 DAYS
THE ORION LIQUIDATING TRUST(18-71748)		Date 03/05/2021
account number 28701412		\$ *****7,856.92
<i>Howard M. Ehrenberg</i>		

ENDORSE HERE
FOR DEPOSIT ONLY WITHIN NAMED PAYEE
CMB 12201006
ACCT 1120108503
03-10-21-34

03/10/2021 288 \$7,856.92

03/10/2021 288 \$7,856.92



Metropolitan Commercial Bank

The **Entrepreneurial** Bank

Metropolitan Commercial Bank
99 Park Avenue
New York NY 10016
<http://www.metropolitanbankny.com>

The logo consists of the word "Member" above the letters "FDIC". The "F" and "D" are capitalized and bolded.

Period Covered:

March 01, 2021 - March 31, 2021

Page 7 of 9

VOID WITHOUT A BLUE BACKGROUND AND A TRUE WATERMARK - HOLD TO LIGHT TO VIEW				
Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071		Metropolitan Commercial Bank New York, NY (212) 345-6739 for EBanking		
289 1-1335160 VOID AFTER 90 DAYS				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px; vertical-align: top;"> <p>Dobro</p> <p>THE ORION LIQUIDATING TRUST (18-71748)</p> <p>Invoice no. 90524594 February 2021 services Customer No. 3006883</p> </td> <td style="padding: 5px; vertical-align: top;"> <p>Date 03/11/2021</p> <p>\$ *****3,709.17</p> </td> </tr> </table>			<p>Dobro</p> <p>THE ORION LIQUIDATING TRUST (18-71748)</p> <p>Invoice no. 90524594 February 2021 services Customer No. 3006883</p>	<p>Date 03/11/2021</p> <p>\$ *****3,709.17</p>
<p>Dobro</p> <p>THE ORION LIQUIDATING TRUST (18-71748)</p> <p>Invoice no. 90524594 February 2021 services Customer No. 3006883</p>	<p>Date 03/11/2021</p> <p>\$ *****3,709.17</p>			
<p>—Three Thousand Seven Hundred and Nine Dollars and 17/100</p> <p>Per to the Order of</p> <p>Epig Corporate Restructuring LLC Dept 0255 P.O. Box 120255 Dallas, TX 75312-0255</p> <p style="text-align: right;"><i>M. Ehrenberg</i> Howard M. Ehrenberg*</p> 				

03/19/2021 289 \$3,709.17

 <p>The security number listed below contains security padding to prevent it from being easily read by others.</p> <p>00000 0890255 00001 0002 03-18-2021 BNYMELLON CRED TO PAYEE ABS END GUAR</p>	<input type="checkbox"/> CHECK HERE IF MOBILE DEPOSIT <small>DIRECT DEPOSIT PAYMENT INFORMATION NOT PROVIDED FOR THIS TRANSACTION</small>	<input checked="" type="checkbox"/> ENDORSE HERE
--	---	---

3/18/21 11:28:47 4105361 001 003 1326 00000

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW															
Metropolitan Commercial Bank															
New York, NY (212) 365-6739 for eBanking															
I-1315/200 VOID AFTER 90 DAYS															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Debtors</td> <td style="padding: 5px; text-align: right;">Date 03/11/2021</td> </tr> <tr> <td style="padding: 5px;">THE ORION LIQUIDATING TRUST((18-71748)</td> <td style="padding: 5px; text-align: right;">\$ *****70 ,060 .65</td> </tr> <tr> <td style="padding: 5px;">Invoice no. 7576156 February 2021</td> <td style="padding: 5px;"></td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"><u>Seventy Thousand Sixty Dollars and 65/100</u></td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"> Pay to the Order of FTI Consulting, Inc. PO Box 418004 Boston, MA 02241-8005 </td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 5px;">  Howard M. Ehrenberg </td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px; background-color: black; color: black;">  </td> </tr> </table>		Debtors	Date 03/11/2021	THE ORION LIQUIDATING TRUST((18-71748)	\$ *****70 ,060 .65	Invoice no. 7576156 February 2021		<u>Seventy Thousand Sixty Dollars and 65/100</u>		Pay to the Order of FTI Consulting, Inc. PO Box 418004 Boston, MA 02241-8005		 Howard M. Ehrenberg			
Debtors	Date 03/11/2021														
THE ORION LIQUIDATING TRUST((18-71748)	\$ *****70 ,060 .65														
Invoice no. 7576156 February 2021															
<u>Seventy Thousand Sixty Dollars and 65/100</u>															
Pay to the Order of FTI Consulting, Inc. PO Box 418004 Boston, MA 02241-8005															
 Howard M. Ehrenberg															
															

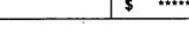
03/16/2021 290 \$70,060.65

\$70,060.65

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW	
<p>Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave. Suite 3400 Los Angeles, CA 90071</p> <p>Metropolitan Commercial Bank New York, NY (212) 345-4739 for Eltsking</p>	
291 1-1315260 VOID AFTER 90 DAYS	
<p>Date: <u>03/11/2021</u></p> <p>THE ORION LIQUIDATING TRUST[18-71748]</p> <p>Invoice no. 3375480 February 2021 services client number 361500</p> <p>\$*****115,400.48</p> <p>One Hundred Fifteen Thousand Four Hundred Dollars and 48/100</p>	
<p>Pay to the Order of</p> <p>Reed Smith LLP PO Box 393489 San Francisco, CA 94139-3489</p>	 <p>Howard M. Ehrenberg</p>

03/18/2021 291 \$115,400.48

\$115,400.48

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW	
<p>Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave. Suite 3400 Los Angeles, CA 90071</p> <p>Metropolitan Commercial Bank New York, NY (212) 345-6739 for ElbaBank</p>	
.292	
1-13352/60	
VOID AFTER 90 DAYS	
<p>Debtor: THE ORION LIQUIDATING TRUST(18-71748)</p>	
<i>Date</i> 03/15/2021	
<p>Invoice 5571340 mediation deposit</p>	
\$ *****9,000.00	
<p><u>Nine Thousand Dollars and 00/100</u></p>	
<p>To the JAMS Ordered PO Box 845402 Los Angeles, CA 90084</p>	
 Howard M. Ehrenberg	

03/17/2021 292 \$9,000.00

\$9,000.00

Period Covered:

March 01, 2021 - March 31, 2021

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THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for E�lanking	.293 1-1335/260 VOID AFTER 90 DAYS
Date 03/15/2021		\$ *****162.00
Pay to the Order of LAGALANTE PLLC 3 W. 35th Street, 6th Floor New York, NY 10001 		

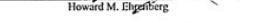
03/25/2021 293 \$162.00

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for E�lanking	.293 1-1335/260 VOID AFTER 90 DAYS
Date 03/15/2021		\$ *****162.00
		

03/24/2021 293 \$162.00

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for E�lanking	.294 1-1335/260 VOID AFTER 90 DAYS
Date 03/16/2021		\$ *****3,551.25
Pay to the Order of THE ORION LIQUIDATING TRUST(18-71748) Invoice 3042877 master 6003206-0024 services December 2020 		

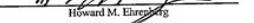
03/23/2021 294 \$3,551.25

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for E�lanking	.294 1-1335/260 VOID AFTER 90 DAYS
Date 03/16/2021		\$ *****3,551.25
		

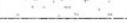
03/23/2021 294 \$3,551.25

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

Howard M. Ehrenberg, Liquidating Trustee 333 South Grand Ave, Suite 3400 Los Angeles, CA 90071	Metropolitan Commercial Bank New York, NY (212) 345-6739 for E�lanking	.295 1-1335/260 VOID AFTER 90 DAYS
Date 03/17/2021		\$ ***1,315,425.00
Pay to the Order of THE ORION LIQUIDATING TRUST(18-71748) contingency fee and expense bill re settlement 		

03/22/2021 295 \$1,315,425.00

THIS CHECK IS VOID WITHOUT A BLUE AND GREEN BACKGROUND AND A TRUE WATERMARK - HOLD AT AN ANGLE TO VIEW

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03/22/2021 295 \$1,315,425.00

Period Covered:

March 01, 2021 - March 31, 2021

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In case of errors or questions about your account telephone Stretto at: 800.634.7734 or email us at: banking.services@stretto.com

As soon as you recognize an error, or if you need more information about a transaction listed on the statement or receipt:

Please Provide:

- Name and account number.
- A detailed explanation of why you believe there is an error or why you need more information.
- The dollar amount of the suspected error.
- We must hear from you no later than 60 days after we sent you the FIRST statement on which the error appeared.

We will investigate your disputed transactions and correct any error promptly. If not resolved within 10 business days, Metropolitan Commercial Bank will credit your account for the amount in error, and notify you within 2 business days, so that you may use the funds during the time it takes us to complete our investigation.